

REMARKS

Claims 2-4, 7-19, 21, 22, 25, 26, and 31-34 are pending in this application.

Applicant has canceled claims 35 and 36. The cancellation of these claims does not introduce any new matter.

In light of the cancellation of claims 35 and 36, Applicant submits that the rejection of these claims under 35 U.S.C. § 102(e) as being anticipated by *Ohga* (U.S. Patent No. US 7,027,067 B1) is moot.

As all of the other pending claims have been allowed, Applicant submits that the subject application is in condition for immediate allowance. As a matter of housekeeping, Applicant notes that the Examiner's list of allowed claims set forth in the Office Action Summary as well as in Paragraph 7 of the Final Office Action is incomplete (this list includes only claims 2-4, 7, 11, 16-19, 22, 26, and 31-34). The list of allowed claims should include all pending claims, namely claims 2-4, 7-19, 21, 22, 25, 26, and 31-34. It is clear from the Examiner's comments in Paragraph 1 of the Final Office Action that the claims missing from the list of allowed claims, i.e., claims 8-10, 12-15, 21, and 25, should have been included in the list of allowed claims.

The amendments made herein involve only the cancellation of claims. Accordingly, the amendments comply with 37 C.F.R. § 1.116(b)(1) and should be entered.

In view of the foregoing, Applicant respectfully requests reconsideration and reexamination of the subject application, and submits that claims 2-4, 7-19, 21, 22, 25, 26, and 31-34 are in condition for allowance. Accordingly, a notice of allowance is respectfully requested. In the event a telephone conversation would expedite the prosecution of this application, the Examiner may reach the undersigned at (408) 749-6902. If any additional

Application No. 10/099,887
Amendment Under 37 C.F.R. § 1.116(b) dated April 25, 2007
Response to Final Office Action mailed January 25, 2007

fees are due in connection with the filing of this paper, then the Commissioner is authorized to charge such fees to Deposit Account No. 50-0805 (Order No. MIPFP011).

Respectfully submitted,
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A handwritten signature in black ink, appearing to read "P. B. Martine", written over a horizontal line.

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